

IN THE UNITED STATES PATENT OFFICE

Applicants:

Sawhney and Rush

Docket No. 9041

For:

METHOD OF PROVIDING HEALTHCARE

Filed: Serial No. August 15, 2003

August 15, 200. 10/642,444

Examiner:

Group:

APPLICATION FOR U.S. PATENT DECLARATION AND POWER OF ATTORNEY

For the above identified patent application and as the below named inventor(s), I/we declare that my/our residence, post office address, and citizenship are as stated below next to my name; that I/we have read and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to herein, that I/we verily believe that I/we am/are the original, first and sole inventor(s) of the invention entitled as set forth below, which is described and claimed in the attached specification; that I/we do not know and do not believe that the same was ever known or used in the United States of America before my/our invention thereof, or patented or described in any printed prior publication in any country before my/our invention thereof, or more than one year prior to this application; or in public use or on sale in the United States of America more than one year before the date of this application; that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me/us or my/our legal representatives or assigns more than twelve months prior to this application; that no application for patent or inventor's certificate on the invention has been filed by me/us or my/our legal representative(s) or assigns in any country foreign to the United States of America, and that I/we acknowledge my duty under 37 CFR 1.56(a) to disclose information of which I/we am/are aware which is material to the examination of this application.

INVENTOR(S):							
Full Name:	Sawhne	y Ajai					
	(last)	(last) (first)		(Middle)			
Residence: _	6117 N.	Reliance	Tucson, Arizona	85 7 04			
	(street)	(city)	(state)	(zip)			
Post Office Address: Same As Above							
		:		. •			
Citizenship:	USA_			_			
				··.			
				•			
Full Name:	Rush	J. L.					
	(last)	(first)	(M	iddle)			
Residence:	Residence: 610 McKee Drive Gallup, New Mexico 87301						
	(street)	(city)	(state)	(zip)			
Post Office	Address: Same	As Above					
		:					
Citizenship:	USA						

POWER OF ATTORNEY:

As the named inventor(s), I/we hereby appoint the following attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

(1) Mark E. Ogram

Registration No. 30343

SEND CORRESPONDENCE TO:

Mark E. Ogram, P.C. 7454 E. Broadway ste 203 Tucson, AZ 85710

DIRECT TELEPHONE CALLS TO:

Mark Ogram: (520) 574-3399

I/we further declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine, or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor(s):

Ajai Sawhney

Signature of Inventor(s):

Date:

Date: 9/28/83



Signature of Inventor:

IN THE UNITED STATES PATENT OFFICE

Applicants: For:	Sawhney and Rush METHOD OF PROVIDING	UEALTUCADE	Docket No	9041	
Filed:	August 15, 2003	HEALTHCARE	Examiner:		¥
Serial No.	10/642,444		Group:		
Scriai 140.	10/042,444		Group.		
	•		•		er .
Applicant:		Docke	t No		
Serial or Paten	t No	Docke		,	
	: Contemporaneously		:		
For:					
VER	STATUS (37 CFR 1				ENTITY
I/we I paying reduced identified abov	nereby declare that I/we am an included fees under Section 41(a) and (b) e	dependent inventor as of Title 35, United So	defined in 37 CF tates Code with	FR 1.9(c)(f) regard to the	for purposes of e invention
I/we l	have not assigned, granted, conve	eved, or licensed and a	m under no oblis	zation under	contract or law to
	convey, or license, any rights in the				
in loss of entitl	acknowledge the duty to file, in the ement to small entity status prior the due after the date on which sta	to paying, or at the tir	ne of paying, the	e earliest of t	he issue fee or any
made on information knowledge that Section 1001 of	hereby declare that all statement in mation and belief are believed to be twillful false statements and the bof Title 18 of the United States Coion, any patent issuing thereon, or	be true; and further, the like so made are punishode, and that such will	at these statement hable by fine or i ful false stateme	nts were mad mprisonmen nts may jeop	de with the at, or both, under pardize the validity
Name	e of Inventor:	Ajai Sawhney			,
rvanik	Address of Inventor:	6117 N. Reliance	· · · · · · · · · · · · · · · · · · ·		
		Tucson, Arizona 85	704		
	_				
				, .	
Name	e of Inventor:	J. L. Rush			
	Address of Inventor:	610 McKee Dr.			
		Gallup, New Mexic	o 87301 ·	<u></u>	
	11/1/				
Signature of Ir	enventor:	Date	10/0'	7/03	
	Aiai Sawhney		· 	· · · · · · · · · · · · · · · · · · ·	